

IAP5 Rec'd PCT/PTO 28 MAR 2006

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	AGENT FOR PROMOTING OSTEOGENESIS AND/OR INHIBITING BONE RESORPTION
Attorney Docket Number::	8062-1037
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	0
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: YOSHIKAZU  
Middle Name::  
Family Name:: MORITA  
Name Suffix::  
City of Residence:: KAWAGOE-SHI  
State or Province of  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing C/O SNOW BRAND MILK PRODUCTS CO., LTD.  
Address:: 1-1-2, MINAMIDAI, SAITAMA  
City of Mailing Address:: KAWAGOE-SHI  
State or Province of Mailing Address::  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address:: 350-1165

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: ATSUSHI  
Middle Name::  
Family Name:: SERIZAWA  
Name Suffix::  
City of Residence:: KAWAGOE-SHI  
State or Province of  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing C/O SNOW BRAND MILK PRODUCTS CO., LTD.  
Address:: 1-1-2, MINAMIDAI, SAITAMA  
City of Mailing Address:: KAWAGOE-SHI

State or Province of Mailing Address::

Country of Mailing Address:: JAPAN

Postal or Zip Code of Mailing Address:: 350-1165

Applicant Authority Type:: Inventor

Primary Citizenship Country:: JAPAN

Status:: Full Capacity

Given Name:: HIROAKI

Middle Name::

Family Name:: MATSUYAMA

Name Suffix::

City of Residence:: KAWAGOE-SHI

State or Province of

Residence::

Country of Residence:: JAPAN

Street of Mailing C/O SNOW BRAND MILK PRODUCTS CO., LTD.

Address:: 1-1-2, MINAMIDAI, SAITAMA

City of Mailing Address:: KAWAGOE-SHI

State or Province of Mailing Address::

Country of Mailing Address:: JAPAN

Postal or Zip Code of Mailing Address:: 350-1165

Applicant Authority Type:: Inventor

Primary Citizenship Country:: JPAN

Status:: Full Capacity

Given Name:: MUTSUMI

Middle Name::

Family Name:: MOTOURI

Name Suffix::

City of Residence:: KAWAGOE-SHI

State or Province of

Residence::

Country of Residence:: JAPAN

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Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address:: 350-1165

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: HIROSHI  
Middle Name::  
Family Name:: KAWAKAMI  
Name Suffix::  
City of Residence:: KAWAGOE-SHI  
State or Province of  
Residence::  
Country of Residence:: JAPAN  
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Postal or Zip Code of Mailing Address:: 350-1165

**Correspondence Information**

Correspondence Customer 00466  
Number::

**Representative Information**

Representative Customer	00466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/JP2004/014761	9/30/04

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
JAPAN	2003-340803	9/30/03	Yes
JAPAN	2003-340804	9/30/03	Yes
JAPAN	2004-218786	7/27/04	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::